

DEC 23 2005



December 23, 2005

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## FAX

RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY
Centralized Fax Department Art Unit 1635 Examiner Jane Zara	571-273-8300	United States Patent & Trademark Office Alexandria, Virginia

Elena S. Polovnikova - 3392

21

FROM

PAGES (WITH COVER)

02811-0281

42368-250224

REFERENCE NO

CLIENT/MATTER NO.

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## COMMENTS

The facsimile confirmation of the Patent Office imprinted hereon will acknowledge receipt of:

Application No: 09/735,363

Filed: December 12, 2000

Applicant: Phillips et al.

For: THERAPEUTICALLY USEFUL SYNTHETIC OLIGONUCLEOTIDES

Papers Submitted: PTO Transmittal form SB21; PTO form SB22 Petition for Extension of Time; PTO form SB17 Fee Transmittal; Amendment transmittal form; Amendment and Response to Non-Final Office Action; PTO-2038

Docket No.: 02811-0181 (42368-250224)

Date Faxed: December 23, 2005

Agent/Sec: ESP:ckf/skr

TO BE COMPLETED BY KS OPERATIONS CENTER

TRANSMISSION RECEIPT DATE/TIME: \_\_\_\_\_

COMPLETED BY: \_\_\_\_\_

JOB CODE 27970

ATLANTA AUGUSTA CHARLOTTE LONDON MIAMI RALEIGH RESTON STOCKHOLM WASHINGTON WINSTON-SALEM  
9082807.1

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

		Application Number	09/735,363
		Filing Date	December 12, 2000
		First Named Inventor	Phillips, et al.
		Art Unit	1635
		Examiner Name	Jane Zara
Total Number of Pages in This Submission	20	Attorney Docket Number	02811-0181 (42368-250224)

## ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
<input type="checkbox"/> Remarks PTO form 2038 authorizing payment of fees Amendment transmittal form		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Klipatrick Stockton LLP		
Signature			
Printed name	Elena S. Polovnikova, Ph.D.		
Date	December 23, 2005	Reg. No.	52,130

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Elena S. Polovnikova, Ph.D.	Date	December 23, 2005

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$)  
625.00

Complete If Known	
Application Number	09/735,363
Filing Date	December 12, 2000
First Named Inventor	Phillips, et al.
Examiner Name	Jane Zara
Art Unit	1635
Attorney Docket No.	02811-0181 (42368-250224)

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## METHOD OF PAYMENT (check all that apply)

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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity	Fee (\$)	Fee (\$)
59	- 20 or HP =	x	= 425.00		50	25

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
4	- 3 or HP =	x	=			

HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	- 100 =	/ 50 = (round up to a whole number)	x	=

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for 2 month EOT (\$225); 17 new claims (\$425)

## SUBMITTED BY

Signature	<u>Elena S. Polovnikova</u>	Registration No. (Attorney/Agent) 52,130	Telephone 404 815 6500
Name (Print/Type)	Elena S. Polovnikova, Ph.D.		Date December 23, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENTS

## IN THE U.S. PATENT AND TRADEMARK OFFICE

In re Application of:

Docket No. 02811-0181 (42368-250224)

Phillips et al.

Serial No. 09/735,363

Filed: December 12, 2000

For: THERAPEUTICALLY USEFUL SYNTHETIC OLIGONUCLEOTIDES

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 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a paper in the above-identified application.

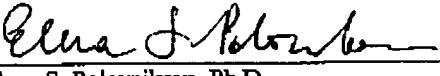
- Petition for Two Month Extension of Time  
 Amendment and Response to Non-Final Office Action.  
 PTO-2038.  
 The additional fee is calculated as shown below:

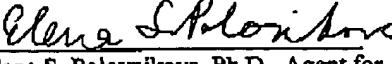
						SMALL ENTITY		OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
TOTAL	59	MINUS	42=	17	x25	\$425	x50	\$	
INDEP.	4	MINUS	6=	0	x100	\$	x200	\$	
FIRST PRESENTATION OF <input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS					+180	\$	+360	\$	
					<b>TOTAL ADDITIONAL FEE</b>	<b>\$425</b>			\$

- Form PTO-2038 is attached authorizing the excess fee charge.  
 The Commissioner is hereby authorized to charge any additional fees required under 37 CFR §1.16, or credit any overpayment, to Account No. 11-0855. A duplicate copy of this sheet is enclosed.

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KILPATRICK STOCKTON LLP  
 1100 Peachtree Street, Suite 2800  
 Atlanta, Georgia 30309-4530  
 Telephone: 404/815-6500

  
 Elena S. Polovnikova, Ph.D.

By:   
 Elena S. Polovnikova, Ph.D., Agent for Applicant  
 Reg. No. 52,130

PATENTS

**IN THE U.S. PATENT AND TRADEMARK OFFICE**

In re Application of:

Docket No. 02811-0181 (42368-250224)

Phillips et al.

Serial No. 09/735,363

Filed: December 12, 2000

For: **THERAPEUTICALLY USEFUL SYNTHETIC OLIGONUCLEOTIDES**

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

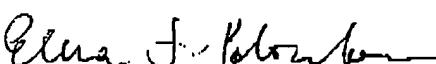
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 PTO-2038.  
 The additional fee is calculated as shown below:

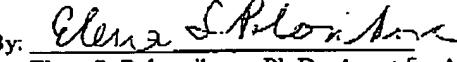
						SMALL ENTITY		OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE	ADDIT. FEE	
TOTAL	59	MINUS	42=	17	x25	\$425	x50	\$	
INDEP.	4	MINUS	6=	0	x100	\$	x200	\$	
FIRST PRESENTATION OF <input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS				+180	\$	+360	\$		
				<b>TOTAL ADDITIONAL FEE</b>	<b>\$425</b>				

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By:   
Elena S. Polovnikova, Ph.D., Agent for Applicant  
Reg. No. 52,130